## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
(571)-273-2885

INSTRUCTIONS: This appropriate. All further indicated unless correct maintenance fee notification.	ed below or directed ot	for trans ng the F herwise	smitting the ISSU Patent, advance of in Block 1, by (a	JE FEE and PUBLICAT rders and notification of a a) specifying a new corre	ION FEE (if requ maintenance fees v spondence address	ired). I vill be ; and/or	Blocks 1 through 5 sh mailed to the current r (b) indicating a sepa	nould be completed where correspondence address as rate "FEE ADDRESS" for
DIRCH STEW PO BOX 747 FALLS CHURC		Fee pap hav	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.  Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.					
					(Depositor's name)			
		(Signature)						
								(Date)
APPLICATION NO. FILING DATE			FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.		CONFIRMATION NO.	
10/575,703 04/13/2006				Yukitaka Shimizu	kitaka Shimizu 1907-0233PUS1 2551			
TITLE OF INVENTION: CONTENT USE CONTROL DEVICE, REORDING DEVICE, REPRODUCTION DEVICE, RECORDING MEDIUM, AND CONTENT USE CONTROL METHOD								
APPLN. TYPE	SMALL ENTITY	ISS	UE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUI	E FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO		\$1740	\$300	\$0		\$2040	02/01/2012
EXAMINER			ART UNIT	CLASS-SUBCLASS	]			
AGWUMEZIE, CHARLES C 3685				705-059000	-			
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.				2. For printing on the patent front page, list  (I) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  SHARP KABUSHIKI KAISHA  OSAKA, JAPAN								
Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🖾 Corporation or other private group entity 🚨 Government								
4a. The following fee(s)  Issue Fee Publication Fee (N Advance Order - #	No small entity discount p		<ul> <li>D. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)</li> <li>A check is enclosed.</li> <li>Payment by credit card. Form PTO-2038 is attached.</li> <li>The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 02-2448 (enclose an extra copy of this form).</li> </ul>					
5. Change in Entity Sta	tus (from status indicated			☐ b. Applicant is no long				
NOTE: The Issue Fee an	d Publication Fee (if requ	uired) w	ill not be accepted					e assignee or other party in
Authorized Signature	Climb	les Pate	Trademark	Office.	Date [L]	rr	111	
· ·	e Charles Gorer	()	Registration No. $29,271$					
This collection of inform an application. Confiden submitting the completed this form and/or suggesti	ation is required by 37 C tiality is governed by 35 d application form to the ons for reducing this bu	FR 1.3I U.S.C. USPTC rden, sho	I. The information I22 and 37 CFR D. Time will vary ould be sent to the	n is required to obtain or r I.I4. This collection is est depending upon the indiv c Chief Information Office	etain a benefit by the imated to take I2 ridual case. Any coer, U.S. Patent and	he publi ninutes mments Tradem	ic which is to file (and to complete, including s on the amount of tim ark Office, U.S. Depar	by the USPTO to process) gathering, preparing, and e you require to complete trent of Commerce, P.O.

Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.